BEST AVAILABLE COPY

								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000									NL 000475				
CLAIMS AS FILED - PART (Column 1)						(Column 2)			SMALL ENTITY TYPE		OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			21					RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FE	E 355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			2 minus 20=		*			X\$ 9=		OR	X\$18=	18	
INDEPENDENT CLAIMS			3 minus 3 =		•			X40=		OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=		
* If	the difference	in column 1 is	less than zero, enter "0" in colu			olumn 2	L _	TOTAL		OR	TOTAL	728	
CLAIMS AS AMENDED - PART II									+	•	OTHER		
(Column 1)				(Colui		(Column 3)		SMALL ENTITY		OR 1	SMALL		
ENT A		REMAINING AFTER AMENDMENT		NUM	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
4ME	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDEN	T CLAIM		上	+135=		1	+270=		
							L	TOTAL	- 1	OR	TOTAL		
	(Column 1) (Column 2) (Column 3)								: L	OR	ADDIT. FEE	l	
<u></u>		(Column 1) CLAIMS		HIGH	HEST		Г		ADDI-	1	[ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	T OL 4141	=		X40=		OR	X80=		
Ļ	HINST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	LCLAIM			+135=		OR	+270=		
							L ΔΓ	TOTAL		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)									_			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	Γ	X\$ 9=		OR	XS18=		
	Independent	*	Minus	***		=	<u> </u>	X40=	1	OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-		-	1		<u> </u>	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
	The "Highest Num	ber Previously Pa	id For" (Total o	r Independ	dent) is the	e highest number	found	d in the a	ppropriate bo	x in co	lumn 1.		